

Goal

Enhance the cardiovascular health and quality of life of all Kentuckians through improvement of medical management, prevention and control of risk factors, and promotion of healthy lifestyle behaviors.

Overview

Cardiovascular disease is the leading cause of death in Kentucky. In 2001, approximately 38 percent of all deaths occurred from cardiovascular disease (heart disease — 30 percent and cerebrovascular disease — 7 percent). Approximately 14,500 Kentuckians died from cardiovascular disease in 2001. Kentucky ranks fifth highest in the nation for heart disease mortality and twelfth in the nation for stroke mortality.

Research shows that specific risk factors increase the occurrence of cardiovascular disease. The major modifiable risk factors are high blood pressure, high blood cholesterol, cigarette smoking, lack of physical activity, poor dietary choices and obesity. Each of these risk factors have high rates of occurrence in Kentucky.

Summary of Progress

Progress is being made toward achieving the 2010 objectives. Significant improvement in the rate of deaths due to heart disease has been made, with a decline from the 1997 baseline of 316 deaths per 100,000 to 290 per 100,000 in 2003. The percent of adults who have had their blood cholesterol checked within the past 5 years has increased from the 1997 baseline of 66 percent to 74 percent in 2003.

Progress has been slow in the area of deaths due to stroke. The rate of death due to stroke has remained level, with a 1997 baseline of 65 per 100,000 as compared to 64 per 100,000 in 2002. The percent of adults who have been told that their blood pressure is too high has increased from the 1997 baseline of 27 percent to 30 percent in 2003.

Data from the 2003 Behavioral Risk Factor Surveillance System (BRFSS) show that 35 percent of adults are aware of all signs and symptoms of a heart attack and would react by calling 911. 2003 BRFSS data also show that 43 percent of adults know all signs of a stroke and would respond by call 911. (This is a new developmental objective.)

Progress toward Achieving Each HK 2010 Objective

Summary of Objectives for Heart Disease and Stroke	Baseline	HK 2010 Target	Mid-Decade Status	Progress	Data Source
20.1R. Reduce heart disease deaths to no more than 250 deaths per 100,000 people (age adjusted to the year 2000 standard).	316/ 100,000 (1997)	≤250/ 100,000	290/ 100,000 (2002)	Yes	Vital Statistics
20.2R. Reduce cerebrovascular deaths to no more than 59 deaths per 100,000 people.	65/ 100,000 (1997)	≤59/ 100,000	64/ 100,000 (2002)	Yes	Vital Statistics
20.3. Decrease to at least 20 percent the proportion of adult Kentuckians with high blood pressure.	27% (1997)	≤20%	29.8% (2003)	No	BRFSS
20.4. Increase to at least 85 percent the proportion of adults who have had their blood cholesterol checked within the preceding five years.	66% (1997)	≥85%	73.9% (2003)	Yes	BRFSS
20.5R. Increase the proportion of Kentucky adults, aged 18 years and over, who are aware of the early warning symptoms and signs of heart attack and importance of accessing rapid emergency care by calling 911.	35% (2002)	≥36%	35% (2002)	N/A	BRFSS
20.6. (DELETED)					
20.7N. Increase the proportion of Kentucky adults aged 18 years and over, who are aware of the early warning symptoms and signs of a stroke and importance of accessing rapid emergency care by calling 911.	43% (2002)	≥44%	43% (2002)	N/A	BRFSS

R = Revised objective

N = New objective

N/A = Only baseline data are available. Not able to determine progress at this time.